

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF  
COMMITTEE (in full)☐(Check if name  
is changed)Example: If typing, type  
over the lines

12FE4M5

ILLINOIS CORN GROWERS ASSOCIATION POLITICAL INVOLVEMENT FUND-FEDERAL

ADDRESS (number and street)

PO Box 1623

☐(Check if address  
is changed)

Bloomington

IL

61702

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

ahodgson@ilcorn.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.ilcorn.org

COMMITTEE'S FAX NUMBER

3098270916

2. DATE

M M  
0 7/ D D  
1 8/ Y Y Y Y  
2 0 0 7

3. FEC IDENTIFICATION NUMBER

C C00376590

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

Ann L Hodgson

Signature of Treasurer

Electronically Filed by Ann L Hodgson

Date

M M  
0 7/ D D  
1 8/ Y Y Y Y  
2 0 0 7

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. § 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)

(b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of  
Candidate

Candidate	Party Affiliation
John Smith	Democratic Party
Jane Doe	Republican Party
Michael Johnson	Independent
Sarah Williams	Democratic Party
David Brown	Republican Party
Emily White	Independent
James Green	Democratic Party
Alice Black	Republican Party
Robert Gray	Independent
Laura King	Democratic Party
Christopher Lee	Republican Party
Michelle Hall	Independent
Andrew Scott	Democratic Party
Olivia Adams	Republican Party
Benjamin Baker	Independent
Sophia Carter	Democratic Party
William Evans	Republican Party
Isabella Foster	Independent
Lucas Garcia	Democratic Party
Charlotte Harris	Republican Party
Henry Ives	Independent
Aria Jones	Democratic Party
Sebastian King	Republican Party
Valentina Lee	Independent
Julian Miller	Democratic Party
Skylar Nelson	Republican Party
Leo Ortiz	Independent
Isabelle Parker	Democratic Party
Maxwell Quinn	Republican Party
Chloe Reed	Independent
Samuel Shaw	Democratic Party
Madeline Taylor	Republican Party
Christopher White	Independent
Alivia Young	Democratic Party
Isaac Zane	Republican Party

Office  
Sought:

1

House

9

Senate

5

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of  
Candidate

- (d) ☐ This committee is a  (National, State (or subordinate) committee of the  (Democratic, Republican, etc.) Party.

(e) ☒ This committee is a separate segregated fund

(f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. **Name of Any Connected Organization or Affiliated Committee**

A horizontal number line with 20 tick marks, labeled from 0 to 19. The line is used for plotting the frequency of each number from the data set.

Mailing Address

CITY STATE 

ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation



Corporation w/o Capital Stock

1

## Labor Organization

7

## Membership Organization

1

Trade Association

9

Cooperative

Write or Type Committee Name

**ILLINOIS CORN GROWERS ASSOCIATION POLITICAL INVOLVEMENT FUND-FEDERAL**

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **Ann L Hodgson**

Mailing Address **PO Box 1623**

**Bloomington** **IL** **61702** - **1623**

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

**Assistant Treasurer** **309** **557** **3257**

Telephone number

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **Kent Kleinschmidt**

Mailing Address **2765 1025th Ave**

**Emden** **IL** **62635** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

**Treasurer** **217** **376** **3361**

Telephone number

Full Name of Designated Agent

Mailing Address

**CITY ▲** **STATE ▲** **ZIP CODE ▲**

Telephone number

- Name of Bank, Depository, etc.

Mailing Address

CITY STATE ZIP CODE